



OFFICE OF BUILDING AND FIRE CODE ADMINISTRATION MODIFICATION REQUEST

Date Applied	Project Name	Modification Number - Permit Number -	Fee Paid \$
Address - Suite or Floor Number(s)		Owner' Name	
Applicant's Name and Relationship to Project: _____ <input type="checkbox"/> Owner <input type="checkbox"/> Design Professional <input type="checkbox"/> Engineer <input type="checkbox"/> Contractor <input type="checkbox"/> Permit Expediter		Phone Number: _____ FAX Number: _____ Email Address: _____	

BUILDING DESCRIPTION

<input type="checkbox"/> New <input type="checkbox"/> Existing	Construction Type	Square Footage: Area to be modified _____ Entire Building _____	Total Number of Stories _____ Number of Stories Above Grade _____
Type of Fire Protection Fire Alarm - <input type="checkbox"/> Yes <input type="checkbox"/> No Sprinkler System - <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> None		<input type="checkbox"/> Not Applicable	Building Height in Feet
Location/Area/Item to be Modified	Previous Occupancy/Use	Current Occupancy/Use	Change of Use? <input type="checkbox"/> Yes <input type="checkbox"/> No

MODIFICATION REQUESTED

Code Edition: _____ Year <input type="checkbox"/> USBC <input type="checkbox"/> IBC <input type="checkbox"/> IRC <input type="checkbox"/> IEBC <input type="checkbox"/> Fire Prevention <input type="checkbox"/> IMC <input type="checkbox"/> IPC <input type="checkbox"/> NEC <input type="checkbox"/> IPMC <input type="checkbox"/> Other _____	Specific Code Section (s) to be Modified
Supporting Data for Modification Requested (Additional sheets of authoritative sources, manufacturer information, lab tests, related code documents, reports etc. may be attached. Do not use approvals and/or conditions/situations in other buildings as each request must stand on its own merit.) _____ _____ _____ _____ _____	
What Will be Achieved if the Modification is Granted? (Describe how the modification will correct a hazard and/or deficiency or upgrade or enhance the structure to be equivalent to current code requirements. Please attach additional sheets if needed.) _____ _____ _____ _____ _____	

DECISION AND/OR COMMENTS

Building/Fire Official <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Signature	Date
Comments: _____ _____ _____ _____ _____ _____		

Appeal Rights. In accordance with the USBC, the decision of the Building/Fire Official may be appealed if the Building/Fire Official has refused to grant a modification to the provisions of this code covering the manner of construction or materials to be used in the erection, alteration or repair of a structure. Appeals must be submitted in writing within 30 calendar days for construction matters; 21 calendar days for fire or property maintenance matters. Appeal applications may be obtained from Code Administration, 703.746.4200, or alexandriava.gov/code.